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Approved for use through 9/30/98. GMB 0881-0002

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## DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

Declaration OR  
Submitted  
with Initial Filing.  Declaration  
Submitted after  
Initial Filing.

|                        |            |
|------------------------|------------|
| Attorney Docket Number | 003AUS     |
| First Named Inventor   | Hammesfahr |
| COMPLETE IF KNOWN      |            |
| Application Number     |            |
| Filing Date            |            |
| Group Art Unit         |            |
| Examiner Name          |            |

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

### Method of Diagnosis and Treatment and Related Compositions and Apparatus

the specification of which

(Title of the Invention)

 is attached hereto

OR

 was filed on 08/08/1996

as United States Application Number or PCT International

Application Number

PC7US97/01570and was amended on 04/04/199729 January 97 (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 35 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (b)-(d) or §365(d) of any foreign application(s) for patent or inventor's certificate, or §365 (d) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date later than that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed   | Certified Copy Attached?                                 |
|-------------------------------------|---------|----------------------------------|--|--|
|                                     |         |                                  | <input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/> | YES <input type="checkbox"/> NO <input type="checkbox"/> |
|                                     |         |                                  |  |  |

 Additional foreign application numbers are listed on a supplemental priority sheet attached hereto.

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

|                       |                          |  |
|-----------------------|--------------------------|--|
| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto. |
| <u>60/010,881</u>     | <u>01/31/1996</u>        |  |

**Notice:** This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete the form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231.  
DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner of Patents and Trademarks, Washington, DC 20231.

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Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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## DECLARATION

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s), or §365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

| U.S. Parent Application Number | PCT Parent Number | Parent Filing Date (MM/DD/YYYY) | Parent Patent Number (if applicable) |
|--------------------------------|-------------------|---------------------------------|--------------------------------------|
|                                |                   |                                 |                                      |

Additional U.S. or PCT International application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

| Name                                    | Registration Number | Name | Registration Number |
|---|---------------------|------|---------------------|
| Richard C. Wilson Jr.<br>Louis Gubinsky | 22080               |      |                     |

Additional registered practitioner(s) named on a supplemental sheet attached hereto.

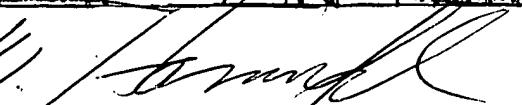
Direct all correspondence to:

|           |                               |
|-----------|-------------------------------|
| Name      | Richard C. Wilson Jr.         |
| Address   | 1401 Winchester Ave 4TH FLOOR |
| Address   |                               |
| City      | Ashland                       |
| Country   | USA                           |
| Telephone | 506 324 3690                  |
| State     | WV                            |
| ZIP       | 24101                         |
| Fax       | 506 325 7336                  |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

A petition has been filed for this unsigned inventor

|                      |   |                |   |             |            |                 |      |        |
|----------------------|---|----------------|---|-------------|------------|-----------------|------|--------|
| Given Name           | William   | Middle Initial | W | Family Name | Hammesfahr | Suffix e.g. Jr. | MD   |        |
| Inventor's Signature |  |                |   |             |            |                 | Date | 7/6/98 |

|                 |                 |       |  |         |  |             |  |
|-----------------|-----------------|-------|--|---------|--|-------------|--|
| Residence: City | 600 Druid Rd E. | State |  | Country |  | Citizenship |  |
|-----------------|-----------------|-------|--|---------|--|-------------|--|

|                     |                   |  |  |  |  |  |  |
|---------------------|-------------------|--|--|--|--|--|--|
| Post Office Address | 600 Druid Road E. |  |  |  |  |  |  |
|---------------------|-------------------|--|--|--|--|--|--|

|                     |              |       |    |     |       |         |             |
|---------------------|--------------|-------|----|-----|-------|---------|-------------|
| Post Office Address | Clearwater 1 |       |    |     |       |         |             |
| City                | Clearwater   | State | FL | Zip | 34616 | Country | U.S.A. - FL |

Additional inventors are being named on supplemental sheet(s) attached hereto

VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS  
(37 CFR 1.91 & 1.27(b))—INDEPENDENT INVENTOR

Docket Number (Optional)

Applicant or Patentee:

William M. Hammesfahr

Application or Patent No.:

PCT/US97/01576 & US National Phase  
filed herewith

Filed or Issued: 29 January 1997

Title: Method of Diagnosis and Treatment  
and Related Compositions and Apparatus

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees to the Patent and Trademark Office described in:

the specification filed herewith with title as listed above.

the application identified above.

the patent identified above.

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

No such person, concern, or organization exists.

Each such person, concern or organization is listed below.

Technology Licensing Co. LLC

Separate verified statements are required from each named person, concern or organization having rights to the invention affering to their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1031 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

William M. Hammesfahr

NAME OF INVENTOR

NAME OF INVENTOR

NAME OF INVENTOR

Signature of Inventor

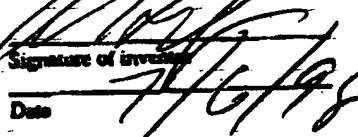
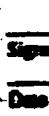
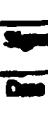
Signature of Inventor

Signature of Inventor

Date

Date

Date


**VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS  
(37 CFR 1.91(i) & 1.27(e))—SMALL BUSINESS CONCERN**

Entity Number (Optional)

Applicant or Person: William M. Hammesfahr M.D.

Application or Patent No.:

Filed or Export:

Title: Method of Diagnosis and Treatment  
and Related Compositions and Apparatus

I hereby declare that I am:

the owner of the small business concern identified below;  
 an official of the small business concern empowered to act on behalf of the concern identified below;

NAME OF SMALL BUSINESS CONCERN Technology Licensing Co. LLC

ADDRESS OF SMALL BUSINESS CONCERN 1401 W. Hastings Ave. 4TH FLOOR  
Ashland KY 41101

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 37 CFR 1.21.12, and reproduced in 37 CFR 1.901, for purposes of paying reduced fees to the United States Patent and Trademark Office, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the census of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year; and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention described in:

the specification filed herewith with title as listed above.  
 the application identified above.  
 the patent identified above.

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights in the invention may file a separate verified statement relating to their status as a small concern, and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(e) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.901, or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization having any rights in the invention is listed below:

no such person, concern, or organization exists.  
 each such person, concern or organization is listed below.

William M. Hammesfahr M.D.

Separate verified statements are required from each named person, concern or organization having rights in the invention relating to their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the entire or the time fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.220(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or patent or cause damage in any manner to which this verified statement is directed.

NAME OF PERSON SIGNING William M. Hammesfahr M.D.

TITLE OF PERSON IF OTHER THAN OWNER Managing Director

ADDRESS OF PERSON SIGNING 1401 W. Hastings Ave. 4TH FLOOR

SIGNATURE William M. Hammesfahr M.D. DATE 7/1/1992